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TRANSMITTAL FORM (to be used for all correspondence after initial filing) Total Number of Pages in This Submission: <u>9</u>	Application Number	09/855,804
	Filing Date	May 16, 2001
	First Named Inventor	Linda Ann Roberts
	Art Unit	2665
	Examiner Name	Jason E. Mattis
	Attorney Docket Number	BS00337

ENCLOSURES

(Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Name (Print/Type)	Bambi Faivre Walters	Reg. No.:	45,197
Signature	<i>Bambi Faivre Walters</i>		
Date	JULY 28, 2006		

CERTIFICATE OF TRANSMISSION / MAILING

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Name (Print/Type)	Sheri Bukowski	Date	July 28, 2006
Signature	<i>Sheri Bukowski</i>		

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	Linda Ann Roberts	Group Art Unit:	2665
Application No.:	09/855,804	Examiner:	Jason E. Mattis
Filed:	May 16, 2001	Docket No.:	BLS00337
Title:	"Priority Caller Alert"		

VIA FACSIMILE 571-273-8300

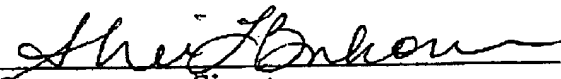
Attn: Examiner Jason E. Mattis

37 C.F.R. § 1.8 CERTIFICATE OF TRANSMISSION

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Sheri Bukowski

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Date of Transmission

INFORMATION DISCLOSURE STATEMENT

Pursuant to 37 CFR §§1.56, 1.97, and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached Form PTO 1449.

This Information Disclosure Statement is being submitted after the mailing of a first Office Action in this application and therefore, a certification fee is believed to be required (37 CFR § 1.97(b)(3)).

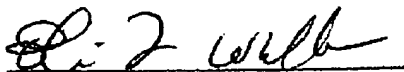
It is respectfully requested that the references listed on the attached forms be expressly considered by the Examiner and be made of record in the application and appear among the "References Cited" on any patent to issue therefrom.

07/31/2006 MBINAS 00000046 09055804

01 FC:1806

180.00 OP

Respectfully submitted,



Bambi F. Walters
Attorney for Applicants
Registration No. 45,197
P. O. Box 5743
Williamsburg, VA 23188
Telephone: 757.253.5729

Date: July 28, 2006

Please type a plus sign (+) inside this box → ☐

PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0851-0031
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Substitute for form 1448A/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet

1

of

4

Complete if Known

Application Number	09/855,804
Filing Date	May 16, 2001
First Named Inventor	Linda A. Roberts
Group Art Unit	2665
Examiner Name	Jason E. Mattis
Attorney Docket Number	BS00337

RECEIVED
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JUL 28 2006**U.S. PATENT DOCUMENTS**

Examiner Initials *	Cite No. ¹	U.S. Patent Document		Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code ² (if known)			
		US-6,909,777		Latter et al.	06-21-2005	
		US-6,560,327		McConnell	05-2003	
		US-6,584,490		Schuster et al.	06-2003	
		US-D338,889		Fuqua	08-31-1993	
		US-D494,953		Leung	08-24-2004	
		US-D437,879		Weinandt	02-20-2001	
		US-D383,466		Burrell et al.	09-09-1997	
		US-D413,605		Thomas	09-07-1999	
		US-09/468,888		Bedingfield	12-22-1999	
		US-09/812,338			03-19-2001	
		US-09/992,165			11-06-2001	
		US-10/032,724			12-27-2001	
		US-10/144,555		Koch	05-13-2002	
		US-10/144,556			05-13-2002	
		US-10/152,544			05-21-2002	
		US-10/174,026			06-18-2002	
		US-10/200,874			07-23-2002	
		US-10/200,905		Ghazarian	07-22-2002	
		US-10/200,906			07-23-2002	
		US-10/201,706			07-23-2002	
		US-10/702,329		Kreiner	11-06-2003	
		US-10/746,804		Perrella	12-24-2003	
		US-10/884,504		Kreiner	07-02-2004	
		US-10/891,883		Smith	07-15-2004	
		2006/0002540		Kreiner et al.	01-05-2006	
		2006/0013375		Smith et al.	01-19-2006	
Examiner Signature					Date Considered	

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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Substitute for form 1449A/PTO		Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (use as many sheets as necessary)		Application Number	09/855,804
		Filing Date	May 16, 2001
		First Named Inventor	Linda A. Roberts
		Group Art Unit	2665
		Examiner Name	Jason E. Mattis
		Attorney Docket Number	BLS00337
Sheet 3	of 4		

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FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. ¹	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ₀
		Office ³	Number ⁴	Kind Code ⁵ (if known)				
			WO 97/50225		World	12-31-1997		
		KR	2002-0014945		English Translation of an Abstract	02-27-2002		
		KR	2002-0014945		Korean Publication (Lee, WY)	02-27-2002		
		EP	0 821 511 A2		Europe	01-28-1998		
OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS								
Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.						T ²
		U.S. Official Action dated September 9, 2004 cited in U.S. Application No. 09/888,832						
		U.S. Official Action dated December 28, 2004 cited in U.S. Application No. 09/888,926						
		Mize, Gary, Patent Pend. Projected Caller ID Own 50% Look [online], September 10, 2000 [retrieved on 09-20-2000]						
		"Venture IP Telephone System" AASTRA (website) 2 pages http://www.aastra.com/products/callerids/voicecallerid/be-6060.html Accessed on August 1, 2005						
		"Venture IP Telephone System" AASTRA (website) 2 pages http://www.aastra.com/products/callerids/voicecallerid/be-6090.html Accessed on August 1, 2005						
		"Venture IP Telephone System" AASTRA (website) 2 pages http://www.aastra.com/products/callerids/voicecallerid/be-9090.html Accessed on August 1, 2005						
Examiner Signature		Date Considered						

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2005</h2> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>		Application Number: 09/855,804 Filing Date: May 16, 2001 First Named Inventor: Linda Ann Roberts Examiner Name: Jason E. Mattis Art Unit: 2665 Attorney Docket No.: BLS00337		RECEIVED CENTRAL FAX CENTER JUL 28 2006
TOTAL AMOUNT OF PAYMENT		\$180.00		
METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other <input type="checkbox"/> Deposit Account Deposit Account No. 19-2167 Deposit Account Name:				
The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments				
FEE CALCULATION				
1. BASIC FILING, SEARCH, AND EXAMINATION FEES				
FILING FEES		SEARCH FEES		EXAMINATION FEES
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)
Utility	300	150	500	250
Design	200	100	100	50
Plant	200	100	300	150
Reissue	300	150	500	250
Provisional	200	100	0	0
				EXAMINATION FEES
				Fee (\$)
				Small Entity Fee (\$)
				50
				25
				200
				100
				360
				180
				Multiple Dependent Claims
				Fee (\$)
				Fee Paid (\$)
2. EXCESS CLAIM FEES Fee Description Fee (\$) Small Entity Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Total Claims Extra Claims Fee (\$) Fee Paid (\$) - 20 or HP = x = HP=highest number of independent claims paid for, if greater than 3. Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) - 3 or HP = x = HP=highest number of independent claims paid for, if greater than 3				
3. APPLICATION SIZE FEE				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250.00 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
Total Sheets		Extra Sheets		Fee (\$)
- 100 =		/ 50		(round up) x
				Fee Paid (\$)
4. OTHER FEE(S)				
Non-English Specification, \$130 fee (no small entity discount)				
Other (e.g., late filing surcharge): Supplemental IDS Fee 180.00				
SUBMITTED BY:				
Name (Print/Type)	Bambi F. Walters	Registration No. (Attorney/Agent)	45,197	Telephone: (757) 253-5729
Signature	Bambi F. Walters		Date	July 28, 2004